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**Audience:** Partner Briefing

**Topic:** Ebola Updates

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## Information Provided on 12-8-14

**Background:** Ebola, previously known as Ebola hemorrhagic fever, is a rare and deadly disease caused by infection with one of the Ebola virus strains. Ebola can cause disease in humans and non-human primates. Ebola viruses are found in several African countries. Ebola was first discovered in 1976 near the Ebola River in what is now the Democratic Republic of the Congo. Since then, outbreaks have appeared sporadically in Africa. The natural reservoir host of Ebola virus remains unknown; however, on the basis of evidence and the nature of similar viruses, researchers believe that the virus is animal-borne and that bats are the most likely reservoir.

The 2014 Ebola epidemic is the largest in history, affecting Guinea, Liberia and Sierra Leone in West Africa. There were a small number of cases reported in Nigeria and a single case reported in Senegal; however, these cases are considered to be contained, with no further spread in these countries.

**Laboratory:** Suspect cases (meeting BOTH the clinical and travel/exposure criteria defined by CDC) identified in Iowa will be sent to CDC for testing. Testing will generally be performed within 24 hours of specimen receipt at CDC. If an entity in Iowa has a possible patient with Ebola, immediately consult with the Iowa Department of Public Health.

**IDPH Actions:** IDPH has activated an incident management structure to organize meetings, develop state and local tracking procedures and fact sheets, develop message map templates, and other tools.

Any suspected cases of Ebola (according to the CDC Guidelines) should be reported immediately to IDPH by phone at **800-362-2736, option 1.**

<http://www.idph.state.ia.us/EHI/Issue.aspx?issue=Ebola>

**Since 11/24/14, IDPH preparedness activities:**

- Established a weekly Ebola briefing webinar for local public health, hospitals, and EMS to provide current Ebola information each **Monday, December 1, 2014, webinar was cancelled following the Thanksgiving holiday. Monday, December 08, 2014 marks the last regularly scheduled webinar due to effective planning efforts and reduction in returned travelers.**

- IDPH met with hospital representatives on November 18<sup>th</sup> to discuss an Ebola Concept of Operations plan. **IDPH continues to work with these facilities and others that have expressed interest in becoming Screening (Tier 3) or Treatment (Tier 2) facilities.**
- IDPH is establishing service agreements with select ambulance services to provide "Ebola Ready" transport services for suspected or confirmed Ebola patients. **IDPH is in the final stages of routing and completing these agreements with services strategically located across Iowa.**
- IDPH met with HSEMD and PSAP representatives on November 20 to discuss the role of PSAP in Ebola preparedness and response.
- IDPH is hosted a meeting in collaboration with Africans in Iowa for Empowerment (AIFE) and local public health to share information related to Ebola on November 15<sup>th</sup> in Polk County. Approximately 40 individuals participated in this education. Weather issues reduced participation.
- Links to guidance, checklists, and factsheets are available on an IDPH Ebola website: <http://www.idph.state.ia.us/EHI/Default.aspx>.
- The SHL is posting Ebola related guidance at: <http://www.shl.uiowa.edu/news/ebolaupdate.xml>
- Continue to respond to numerous inquiries from healthcare providers and citizens regarding both specific and general concerns. **211 questions/concerns have been addressed since 10.20.14.**
- A budgetary request was sent to Congress requesting financial support of Ebola preparedness and response efforts.

**Count of Public Health Orders for Ebola**  
Data as of 12.7.2014

The following table indicates the number of public health orders that have been issued. There are no suspected or confirmed cases of Ebola in Iowa. No persons in Iowa are being tested for Ebola. No individuals under public health orders are showing symptoms of Ebola at this time. All individuals under public health orders are cooperating with the Iowa Department of Public Health.

Type of Action	# of Current Orders	Total # of Orders Issued since 9.1.14
Self-Monitoring Order	1	16
Quarantine Order	0	1
Isolation Order	0	0

- Self-monitoring Order: *Low risk* travelers are allowed normal activities and twice daily self-monitoring and reporting of temperature and any other Ebola consistent symptoms. No signs of illness are present.
- Quarantine Order: *Some or high risk* travelers are restricted to a specified location (i.e. home) and reporting of temperature (twice daily with at least once in presence of public health official) or any other Ebola consistent symptoms. No signs of illness are present.
- Isolation Order: Travelers with symptoms consistent with Ebola are restricted to a specified location (i.e. hospital room) and are under medical care.

Only state-level data is released to the public. Because of the small number of travelers returning to Iowa from Ebola-affected countries in West Africa, the release of county-level data could lead to identification of an individual, which is in violation of Iowa Code Chapter 22.

**Current Case Counts for Individuals Diagnosed in the U.S., confirmed by CDC**

Source: [www.cdc.gov](http://www.cdc.gov)

Data as of 10:00 am 11.21.14

State	Cases	Total Deaths
Texas	3	1
New York	1	0
Total	4	1

Four cases of Ebola have been confirmed in the United States: one case imported; two healthcare workers that were exposed to the imported case; and 1 healthcare worker exposed in Guinea.

**Count of Individuals Under IDPH Public Health Orders for Potential Exposure to Ebola by Risk Level as of 12.7.14**

The following table indicates the initial evaluation of individuals placed under public health orders.

Risk Level	# of individuals Currently Under an Order	Total # of Individuals Under Order since 9.1.14
Low Risk	1	16
Some Risk	0	1
High Risk	0	0

- *Low Risk* – Travelers from Sierra Leone, Liberia, or Guinea within last 21 days, but no known exposures to Ebola. No signs of illness are present.
- *Some Risk* – Travelers from Sierra Leone, Liberia, or Guinea within last 21 days, who worked directly with patients with Ebola, but had no identified personal protective equipment breaches. No signs of illness are present.
- *High Risk* – Travelers from Sierra Leone, Liberia, or Guinea within last 21 days, who worked directly with patients with Ebola, and had unprotected contact with the bodily fluids of an Ebola patient. No signs of illness are present.
- Additional information on risk levels and public health orders are found at:

<http://www.idph.state.ia.us/IDPHChannelsService/file.ashx?file=A9B0EBCE-5D19-4EBE-9B79-AEDCE005D67F>

**Current International Case Counts**

Source: <http://www.cdc.gov/vhf/ebola/outbreaks/2014-west-africa/case-counts.html>

Data as of 1:00 pm on 12.8.14

Country	Total Cases	Lab Confirmed Cases	Total Deaths
Guinea	2192	1956	1366
Liberia	7690	2824	3161
Sierra Leone	7635	6201	1660
Total	17517	10981	6187

A U.S. physician who worked in Sierra Leone contracted Ebola. He was transferred from Sierra Leone to the Nebraska Medical Center for treatment where he died on Monday, November 17, 2015. This individual was not diagnosed in the U.S. and is not included in CDC U.S. case counts.